



## CANDIDATE FUNDING CLAIM

Electoral Act 1907, section 175LD

Election event date	September 6, 2008 General Election
Electoral expenditure amount claimed	\$10,482.00

Candidate Details	
Name	SUSAN ELIZABETH WALKER
In full - block letters	

Address (for correspondence)	19 BORT STREET, COTTESLOE WA 6011		Postcode	
Telephone		Mobile	04 212 87500	
Facsimile		Email		

I have appointed an agent to act on my behalf under section 175C of the Electoral Act 1907 as shown below.  
If YES, please complete agent details below. If NO, leave blank.

Agent Details	
Name	SATORI BETINA HEALEY
In full - block letters	

Address (for correspondence)	6 CATHERINE STREET		Postcode	6008
	SUBIACO WA			
Telephone		Mobile	0431 831 773	
Facsimile		Email		

Please pay entitlement \$6,979.95  
DN 5/1/09

WAEC  
18 DEC 2008

**Declaration of Agent or Candidate if No Agent**

I certify that the information contained in this claim and its attachments\* is true, complete and accurate in every particular, and that the relevant records required to be kept under regulation 15 of the *Electoral (Political Finance) Regulations 1996* have been kept and will, if asked for, be made available for inspection at:

19 Bort Street, Cottesloe WA 6011  
being a place in this State

*Anthony*

Signature of agent

17 / 12 / 2008

Date

**\* Important:** This claim must be accompanied by an independently audited financial statement which certifies that the expenditure amount claimed is: in accordance with the definition of 'electoral expenditure' at section 175 of the *Electoral Act 1907*; in accordance with section 175LD of the *Electoral Act 1907*; and, supported by receipts and/or other documentation. This statement must be signed by a qualified member of a recognised accounting organisation. For more information please contact the officer listed on this form.

Preferred method of payment

Cheque



payable

Bank



Please direct my payment to the following account: to Sue Walker.

Bank/Financial Institution Name: and mailed to her account.

Branch:

Financial Institution Id: (BSB Code)

(6 digits required)

Account Number:

Account Name:

This claim must be lodged within 20 weeks after polling day in the relevant election with the Western Australian Electoral Commissioner. Claims and any queries should be directed to:

Electoral Liaison Officer  
Western Australian Electoral Commission  
Level 2, 111 St Georges Terrace  
PERTH WA 6000 or  
GPO Box F316 PERTH WA 6841

Telephone: (08) 9214 0400  
Fax: (08) 9226 0577  
Email: waec@waec.wa.gov.au

**FOR OFFICE USE ONLY**

Date received

18 / 12 / 08

Date entered in EMSWA

5 / 1 / 09

% first preference votes received

\$6,974,449  
22.75%

Election funding reimbursement amount (as calculated under section 175LC, *Electoral Act 1907*)

\$6,979.95.

Amount paid

\$6,979.95

Date sent

6 / 1 / 09